PTO/SB/21 (09-04) Approved for use through 07/31/2006, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons Application Number 10/003,459 RECEIVED Filing Date TRANSMITTAL October 31, 2001 CENTRAL FAXICENTER First Named Inventor FORM San Yuan Liew Art Unit DEC 0 3 2004 2651 **Examiner Name** Alan Faber (to be used for all correspondence after initial filing) Attorney Docket Number STL10252 Total Number of Pages In This Submission ENCLOSURES (Check all that apply) After Allowance Communication to TC $|\mathbf{x}|$ Drawing(s) Fee Transmittal Form Appeal Communication to Board of Appeals and Interferences Licensing-related Papers Fee Attached Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify **Terminal Disclaimer** below): Extension of Time Request Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Seagate Technology LLC Signature Printed name David K. Lucente Reg. No. Date 36,202 3/04 **CERTIFICATE OF TRANSMISSION/MAILING** I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450. Alexandria, VA 22313-1450 on the date shown below: Signature

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Effective on 10/01/2004. Patent fees are subject to annual revision.				
FEE TRANSMITTAL	Application Number Filing Date	October 31, 2001		
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For FY 2005				
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	2 12441 2 444		
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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit Card Money Order	2. EXTRA CLAIM Fee Description	FEES	Fee (\$)	Small Entity Fee (5)
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FEE CALCULATION	2-month extension of t	ime 430	215	
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Reissue Filing Fee 790 395	Request for oral hearing		150	
Provisional Filing Fee 160 80	Other:			
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SUBMITTED BY				
Registration No. (Attorney/Agent) 36,202 Telephone 720-684-2295				
Name (Print/Type) David K. Lucente		Date	Decembe	r 3, 2004

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FEE TRANSMITTAL	Filing Date Octo	October 31, 2001			
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Reissue Filing Fee 790 395	Request for oral hearing	300 150			
Provisional Filing Fee 160 80	Other:	 ·			
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SUBMITTED BY	Registration No. 36,202	Telephone 72	0-684-2295		
Signature 5	(Attomey/Agent) 30,202		er 3, 2004		
Name (Print/Type) David K. Lucente					

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